

# NOTICE OF INTENT

## Department of Health and Hospitals Board of Nursing and Board of Medical Examiners

### Advanced Practice Registered Nurse Demonstration Projects (LAC 46:XLVII.4513)

Notice is hereby given, that the Board of Nursing (board) and Board of Medical Examiners, pursuant to the authority vested in the board by R.S. 37:918(K), and 37:1031-1035 in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., intend to adopt LAC 46:XLVII.4513.C., Prescriptive and Distributing Authority for Advanced Practice Registered Nurses, to standardize the process and requirements for application of prescriptive authority as a nurse practitioner, certified nurse midwife, and clinical nurse specialist in Louisiana. The proposed rules are set forth below.

#### **Title 46**

### **PROFESSIONAL AND OCCUPATIONAL STANDARDS**

#### **Part XLVII. Nurses**

#### **Subpart 2. Registered Nurses**

#### **Chapter 45. Advanced Practice Registered Nurses**

#### **§4513. Authorized Practice**

A. - B.8. ...

C. Prescriptive and Distributing Authority. The advanced practice registered nurse (APRN) shall practice in a manner consistent with the definition of advanced practice set forth in R.S. 37:913.3.b and the provisions of R.S. 37:1031-1035.

1. The 1995 Louisiana legislature authorized the creation of the Committee on Prescriptive Authority for Advanced Practice Registered Nurses, under the joint jurisdiction of the Louisiana State Board of Nursing and the Louisiana State Board of Medical Examiners, to recommend rules and regulations governing the formulation of demonstration projects using APRNs to provide specified prescriptive services under physician direction, in certain under-served health care areas and certain areas of demonstrated health care needs in the state as determined by appropriate and scientific criteria, including but not limited to physician to general population ratios.

2. The application for the APRN to be granted prescriptive authority to prescribe legend drugs, assessment studies and therapeutic devices, and to distribute free drug samples and other gratuitous medications supplied by drug manufacturers may be made as part of initial APRN licensure application with no additional fee or by separate application with the nonrefundable fee as set forth in LAC 46:XLVII.3361.

3. Definitions as used in this Part:

a. *Act*—Acts 1995, No. 629, R.S. 37:1031-1035.

b. *Board*—the Louisiana State Board of Nursing.

c. *Collaborating Physician*—the physician with whom the APRN has developed and signed guidelines for prescribing practice.

d. *Demonstration Projects*—the pilot projects established by the Joint Administration Committee allowing designated APRNs to provide specified prescriptive services for the purpose of data collection and analysis.

e. *Distribute*—the issuing of free samples and other gratuitous medications supplied by drug manufacturers, as defined by protocol.

f. *Joint Administration Committee*—the joint subcommittee comprising three members designated by the board and three members designated by the Louisiana State Board of Medical Examiners constituted to prescribe the procedures for approval, modification, or denial of demonstration projects as contemplated by the Act.

g. *Prescribe*—to direct, order, or designate the preparation, use of or manner of using by spoken or written words.

h. *Under Physician Direction*—the limited prescriptive authority as approved by the Joint Administration Committee and demonstrated in the collaborative practice agreement as provided for in R.S. 37:913.9.

4. The applicant shall meet the following requirements:

a. holds a current, unencumbered, unrestricted and valid registered nurse license in Louisiana and is without grounds for disciplinary proceedings as stated in R.S. 37:921;

b. holds a current, unencumbered, unrestricted and valid APRN license;

c. provides evidence of:

- i. one year of active full-time practice in the clinical specialty for which the applicant was educationally prepared as an APRN immediately prior to applying for prescribing and distributing privileges;
- ii. a notarized application on a form provided by the board;
- iii. successful completion of a minimum of 36 contact hours of education in advanced pharmacotherapeutics obtained as a component of a formal educational program preparing registered nurses for advanced practice or continuing education programs, approved by the board, within the four-year time period immediately prior to the date of application for prescriptive and distributing authority, at least 12 hours of which shall have been obtained within two years prior to application, which:
  - (a). are related to the applicant's advanced practice category and area of specialization;
  - (b). include knowledge of pharmacokinetics principles and their clinical application;
  - (c). include the use of pharmacological agents in the prevention of illness, restoration and maintenance of health.
- iv. any deviation from 4.c.iii must be submitted to the Joint Administration Committee for review and approval.
- v. a collaborative practice agreement with a licensed physician or physician group which shall include a plan of accountability between both parties to include, but not be limited to:
  - (a). clinical practice guidelines as required by R.S. 37:913(9)(b);
  - (b). availability of the collaborating physician; and
  - (c). patient care coverage during the absence of the APRN, physician, or both parties with documented review of the guidelines with the on-call physician.

#### 5. Application Process for Selecting the Demonstration Projects

- a. The Joint Administration Committee reviews and authorizes approval for the demonstration projects.
- b. Eligible APRNs are defined as:
  - i. certified nurse midwives (CNMs);
  - ii. clinical nurse specialists (CNSs) in specialty areas of diabetes, psych/mental health, cardiovascular and oncology; and
  - iii. nurse practitioners (NPs).
- c. Eligible sites are defined to include without limitation:
  - i. school-based centers;
  - ii. nursing homes and other geriatric settings;
  - iii. primary care outpatient facilities;
  - iv. rural health clinics;
  - v. federally qualified health centers (FQHC);
  - vi. charity hospital outpatient clinics;
  - vii. women's health clinics;
  - viii. university student health centers;
  - ix. other areas as identified with a demonstrated need.
- d. Approval of demonstration sites will be authorized by the Joint Administration Committee in such a manner to insure balance in the type of setting, geographic location and reflect the ability of the committee to appropriately monitor the sites.

- e. The APRN must demonstrate compliance with LAC 46:XLVII.4513.C.2.

#### 6. Limited Prescriptive Authority

- a. An APRN with limited prescriptive authority approved by the boards may prescribe legend drugs, over the counter drugs, medical devices and appliances as indicated by protocol.
- b. A prescription for legend drugs may be written to be refilled three times or up to three months, whichever comes first.
- c. An APRN who is authorized by the Joint Administration Committee to exercise prescriptive authority shall not prescribe or distribute any controlled substance as defined, enumerated or included in federal or state statutes or regulations, 21 CFR. §1308.11-15., R.S. 40:964, or any substance which may hereafter be designated a controlled substance by amendment or supplementation of the cited regulations and statute, except as may be explicitly authorized by the Joint Administration Committee. An APRN who is so authorized shall not prescribe controlled substances of any class until and unless the APRN applies for and obtains a license from the Louisiana Division of Narcotics and Dangerous Drugs and registration with the U.S. Drug Enforcement Administration for the appropriate controlled substance schedules and files copies of such license and registration with the board.
- d. Each order for a prescription shall comply with the following criteria:
  - i. the name, office address, telephone number, "RN" designation and clinical specialty area of the APRN;
  - ii. the collaborating physician's name shall be pre-printed, stamped, or handwritten on the prescription form and must be clearly distinguished;
  - iii. the date the prescription is written;

- iv. the name and home address and telephone number of the patient;
- v. the full brand name of the drug and directions for its use;
- vi. each prescription written by an APRN pursuant to authority granted under these rules shall bear the legend: "DEMONSTRATION PROJECT (per R.S. 37:1031-1035)";
- vii. an APRN with prescriptive authority shall retain a duplicate or copy of each prescription written and issued to patients;
- viii. prescriptions written by an authorized APRN shall comply with all the applicable state and federal laws and be signed by the prescriber with the abbreviation for the applicable category of advanced nursing practice and the identification number assigned by the board.
- e. Each year the APRN with limited prescribing authority shall obtain six contact hours of continuing education in pharmacology or pharmacology management approved by a national professional accrediting organization. Documentation of completion of the above contact hours shall be submitted for license renewal.
- f. APRN prescriptive authority shall be renewed as part of the APRN license.
- g. The board shall be responsible for maintaining a current up-to-date public list of APRNs who have limited authority to prescribe in the state. An updated list of APRNs with limited prescriptive authority shall be sent by the board to the Louisiana State Board of Pharmacy on a monthly basis by APRN category and specialty.
- h. The Board of Nursing shall supply whatever data is needed by the Office of Narcotics and Dangerous Drugs of the Department of Health and Hospitals.

**7. Distribution of Free Drug Samples and Other Gratuitous Medications Supplied by Drug Manufacturers**

- a. Distribution of free drug samples and other gratuitous medications supplied by drug manufacturers, other than controlled substances, must :
  - i. be consistent with the APRN scope of practice and collaborative agreement;
  - ii. be recorded in the patient record; and
  - iii. be in accordance with other state and federal statutes and regulations.
- b. Free drug samples issued shall be in the manufacturers' original packaging and shall be labeled to show the name of the drug, strength in the original packaging along with directions for use. With the exception of medication samples as authorized by this rule, an APRN with prescriptive authority shall not accept or distribute any controlled substance, legend drug or other medication, except as authorized by R.S. 37:933.

8. An APRN granted limited prescriptive and distributing authority shall comply with all applicable laws and rules in prescribing, distributing and administering drugs, including compliance with labeling requirements R.S. Title 37:1195.b; 37:1701; 37:911 et seq., and 37:1261 et seq.

**9. Limitation**

- a. The Joint Administration Committee shall review the application and all related material and shall approve, modify or deny the application.
- b. An APRN's limited prescriptive and distributing authority is not delegable.

10. Exclusion. Nothing herein shall require a CRNA to have prescriptive authority to provide anesthesia care, including the administration of drugs or medicine necessary for anesthesia care.

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 37:918(K), and R.S. 37:1031-1035.

**HISTORICAL NOTE:** Promulgated by the Department of Health and Hospitals, and Board of Nursing, LR 22: (April 1996), amended by the Department of Health and Hospitals, Board of Nursing and Board of Medical Examiners, LR 22:

A public hearing will be held on April 29, 1996, at 10 a.m., at the Airport Hilton, 901 Airline Highway, Kenner, LA. Interested persons are invited to attend and submit oral comments on the proposed rules.

All interested persons are invited to submit written comments on the proposed rules. Such comments must be submitted no later than April 23, 1996 at 4:30 p.m., to Barbara L. Morvant, Executive Director, Louisiana State Board of Nursing, 150 Baronne Street, Suite 912, New Orleans, LA 70112.

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**FISCAL AND ECONOMIC IMPACT STATEMENT  
FOR ADMINISTRATIVE RULES  
RULE TITLE: APRN Demonstration Projects**

**I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS**

(Summary)

Increased expenditures are expected due primarily to travel expenses of members appointed to the Committee on Prescriptive Authority; travel expenses of board members appointed to the Joint Administrative Committee; and staff travel to committee meetings. The funds necessary to implement these rules will be provided from the operating expenses from the Louisiana State Board of Nursing and Louisiana State Board of Medical Examiners.

Projected expenditures are based on five meetings of the Committee on Prescriptive Authority the first year. Six members and two staff members are anticipated for each. Also, it is projected that the Joint Committee will meet eight times during the first year and 10 times during the second year. Expenditures are estimated to be \$22,000 in FY 1995/96, and \$19,000 in both 1996/97 and 1997/98.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

There will be no effect on revenue collections of state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS OR NONGOVERNMENTAL GROUPS (Summary)

There are no anticipated cost increases to directly affected persons or nongovernmental groups. The physicians and advanced practice registered nurses (APRNs) who participate in the pilot project will need to complete a report of activities and/or participation of data collection for evaluation of the project. There may be a slight economic benefit to both the physicians in Louisiana, who would be collaborating with the advanced practice registered nurses (APRNs) with prescriptive authority privileges; and the public who would be receiving care and prescriptions from advanced practice registered nurses as a result of more efficient utilization of the APRNs' services.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

There is no anticipated effect on competition and employment, as the APRNs who participate in the demonstration projects were already employed in their current positions.

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